PTO/SB/06 (08-03)
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PATEN	T APPLICATION Substitu	te for Form PTC	RMINATION 2-875	RECORD		-induces	on or Docket Nur	······································
CLAIMS AS FILED - PART I (Column 2) SMALL ENTITY						OR	OTHER THAN SMALL ENTITY	
FOR NUMBER FILED NUMBER EXTRA		R EXTRA	RATE	FEE		RATE	FEE	
ASIC FEE : 37 CFR 1.18(a))	·			<u></u>	OR	·	<u>:00</u>	
TOYAL CLAIMS 37 CFR 1.18(c))	3.7 minus 20		7]	.x s*		OR	x 8	30,0
KDEPENDENT CLAIMS 37 CFR 1.16(b))	L) minus 3		1	x s	·	OR	x \$•	ØΨ
ALTIPLE DEPENDENT C	+5 0		OR .	+50				
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d)) If the difference in column 1 is less than zero, enter "0" in column 2.						QR	TOTAL	गद्
•	AS AMENDED			`	•			
5-10-010			OR	OTHER				
ש שטיישר	Column 1)	(Column 2)	(Column 3)	SMALLE	YTITY		SMALL	ENTITY
닐	CLAIMS. EMAINING AFTER .!	NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADOI- TIONAL. FEE		RATE	ADDF TIONAL FEE
	Minus	PAID FOR	.4	V. .	· FEE		× 3 •	
Total Gross Lista Fridependent Gross Lista Total Gross Lista	Minus	-21	.5			OR		
3				× s		OR	× 3	
REPORT PRESENTATION OF MULTIPLE DEPENDENT CLASS (17 CFR 1.18(5))				TOTAL 2	·	OR	TOTAL	
1/2/1/10				ADD' FEE	<u> </u>	OR .	ADD'L FEE	
77900 (Column 1)	(Column 2)	(Column 3)					
⊵ '	EMAINING .	NUMBER PREVIOUSLY	PRESENT EXTRA	RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total	ENDMENT Minus	PAID FOR	•	X 3		OR)	X 5 -	
Total CO car cris 1.18(a) Z Independent Z Independent (pr cris 1.18(a))	2. Minus	= 1	•	X S		OR	x s =	
EINST; PRESENTATION OF MULTIPLE DEPENDENT CLAIM (ST CFR 1.18(d))						OR .	.,	
eustyresetta.				TOTAL ADD'L FEE	_	OR	TOTAL ADO'L FEE	
12-11-06 "	Column 1)	(Column 2)	(Cotumn 3)	•		·•		
O R	CLAIMS EMAINING AFTER	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total A	Minus	39	-	× 5 =		OR	× 4	
Z Independent!	2. Minus	" 4	۰	x 5=	•	OŔ	x s=	•
₹ 	N OF MULTIPLE DEPEND	ENTOLAN (37 C	FR 1.16(d))	+; 0		OR	+ 3	
	1 .			TOTAL ADD'L FEE		OR.	YOTAL ADD'L FEE	
	on 1 is less than the ent their Previously Paid For her Previously Paid For er Previously Paid For	A IN APRIC COVCE	HI LORS INON 20	APTRE "ZU".		•		

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This adjection of Information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and automating the complete application form to the USPTO. Time will vary depending upon the individual case. Any comments including gathering, preparing to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Transmark Office; U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND.TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need essistance in completing the form, call 1-800-PTO-9199 and select option 2